Long-Term Care Rate Guide Premium Rate Increase History Section Company Explanation Section

THRIVENT FINANCIAL FOR LUTHERANS

Policy Form	Explanation
12067	The range of increase, for all versions of 12067, was from 0% - 5% with the maximum being 5%. The average increase to these policies was 2.0%, affecting the issue ages of 70 - 84 only.
12067	The range of increase, for all versions of 12067, was from 0% - 5% with the maximum being 5%. The average increase to these policies was 2.0%, affecting the issue ages of 70 - 84 only.
12068	The range of increase, for all versions of 12068, was from 0% - 5% with the maximum being 5%. The average increase to these policies was 2.0%, affecting the issue ages of 70 - 84 only. Rate changes are not required to be approved in the states of Alaska, Hawaii, and Montana.
12068	The range of increase, for all versions of 12068, was from 0% - 5% with the maximum being 5%. The average increase to these policies was 2.0%, affecting the issue ages of 70 - 84 only. Rate changes are not required to be approved in the states of Alaska, Hawaii, and Montana.
12070	The range of increase, for all versions of 12070, was from 0% - 5% with the maximum being 5%. The average increase to these policies was 1.3%, affecting the issue ages of 70 - 84 only. Rate changes are not required to be approved in the states of Alaska, Hawaii, and Montana.
12070	The range of increase, for all versions of 12070, was from 0% - 5% with the maximum being 5%. The average increase to these policies was 1.3%, affecting the issue ages of 70 - 84 only. Rate changes are not required to be approved in the states of Alaska, Hawaii, and Montana.
12105	OH - *one-half of the increase implemented on Nov 1, 2006 and 2007.
12105	MS - *one-half of the increase implemented on Nov 1, 2006 and 2007.
12105	SD - *one-half of the increase implemented on Nov 1, 2006 and 2007.
12105 and 12106	The average increase is 20%. The increase is needed due to three major factors: 1) Lower than expected investment earnings; 2) Higher than expected persistency (lower lapse and mortality); 3) Higher than expected projected morbidity.
12105 and 12106	The average increase is 20%. The increase is needed due to three major factors: 1) Lower than expected investment earnings; 2) Higher than expected persistency (lower lapse and mortality); 3) Higher than expected projected morbidity.
12105 and 12106	The average increase is 20%. The increase is needed due to three major factors: 1) Lower than expected investment earnings; 2) Higher than expected persistency (lower lapse and mortality); 3) Higher than expected projected morbidity.

12105 and 12106	The average increase is 20%. The increase is needed due to three major factors: 1) Lower than expected investment earnings; 2) Higher than expected persistency (lower lapse and mortality); 3) Higher than expected projected morbidity.
12105 and 12106	The average increase is 20%. The increase is needed due to three major factors: 1) Lower than expected investment earnings; 2) Higher than expected persistency (lower lapse and mortality); 3) Higher than expected projected morbidity.
12105 and 12106	The average increase is 20%. The increase is needed due to three major factors: 1) Lower than expected investment earnings; 2) Higher than expected persistency (lower lapse and mortality); 3) Higher than expected projected morbidity.
12106	SD - *one-half of the increase implemented on Nov 1, 2006 and 2007.
12106	MS - *one-half of the increase implemented on Nov 1, 2006 and 2007.
12106	OH - *one-half of the increase implemented on Nov 1, 2006 and 2007.
4911	The range of increase, for all versions of 4911, was from 0% - 5% with the maximum being 5%. The average increase to these policies was 2.0%, affecting the issue ages of 70 - 84 only. Rate changes are not required to be approved in the states of Alaska, Hawaii, and Montana.
4911	The range of increase, for all versions of 4911, was from 0% - 5% with the maximum being 5%. The average increase to these policies was 2.0%, affecting the issue ages of 70 - 84 only. Rate changes are not required to be approved in the states of Alaska, Hawaii, and Montana.
4912	The range of increase, for all versions of 4912, was from 0% - 5% with the maximum being 5%. The average increase to these policies was 1.3%, affecting the issue ages of 70 - 84 only. Rate changes are not required to be approved in the states of Alaska, Hawaii, and Montana.
4912	The range of increase, for all versions of 4912, was from 0% - 5% with the maximum being 5%. The average increase to these policies was 1.3%, affecting the issue ages of 70 - 84 only. Rate changes are not required to be approved in the states of Alaska, Hawaii, and Montana.
H2-LA-LTC-1	The average increase is 20%. The increase is needed due to three major factors: 1) Lower than expected investment earnings; 2) Higher than expected persistency (lower lapse and mortality); 3) Higher than expected projected morbidity.
H2-LA-LTC-1	The average increase is 20%. The increase is needed due to three major factors: 1) Lower than expected investment earnings; 2) Higher than expected persistency (lower lapse and mortality); 3) Higher than expected projected morbidity.
H2-LA-LTC-1	The average increase is 20%. The increase is needed due to three major factors: 1) Lower than expected investment earnings; 2) Higher than expected persistency (lower lapse and mortality); 3) Higher than expected projected morbidity.

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H2-LA-LTC-1	The average increase is 20%. The increase is needed due to three major factors: 1) Lower than expected investment earnings; 2) Higher than expected persistency (lower lapse and mortality); 3) Higher than expected projected morbidity.
H2-LA-LTC-1	MS - *one-half of the increase implemented on Nov 1, 2006 and 2007.
H2-LA-LTC-1	OH - *one-half of the increase implemented on Nov 1, 2006 and 2007.
H2-LA-LTC-1	SD - *one-half of the increase implemented on Nov 1, 2006 and 2007.
H2-LH-LTCH-1	SD - *one-half of the increase implemented on Nov 1, 2006 and 2007.
H2-LH-LTCH-1	MS - *one-half of the increase implemented on Nov 1, 2006 and 2007.
H2-LH-LTCH-1	OH - *one-half of the increase implemented on Nov 1, 2006 and 2007.
H2-LN-LTC-1	SD - *one-half of the increase implemented on Nov 1, 2006 and 2007.
H2-LN-LTC-1	MS - *one-half of the increase implemented on Nov 1, 2006 and 2007.
H2-LN-LTC-1	OH - *one-half of the increase implemented on Nov 1, 2006 and 2007.
H2-LN-LTC-1 and H2-LH-LTCH-1	The average increase is 15%. The increase is needed due to three major factors: 1) Lower than expected investment earnings; 2) Higher than expected persistency (lower lapse and mortality); 3) Higher than expected projected morbidity.
H2-LN-LTC-1 and H2-LH-LTCH-1	The average increase is 15%. The increase is needed due to three major factors: 1) Lower than expected investment earnings; 2) Higher than expected persistency (lower lapse and mortality); 3) Higher than expected projected morbidity.
H2-LN-LTC-1 and H2-LH-LTCH-1	The average increase is 15%. The increase is needed due to three major factors: 1) Lower than expected investment earnings; 2) Higher than expected persistency (lower lapse and mortality); 3) Higher than expected projected morbidity.
H2-LN-LTC-1 and H2-LH-LTCH-1	The average increase is 15%. The increase is needed due to three major factors: 1) Lower than expected investment earnings; 2) Higher than expected persistency (lower lapse and mortality); 3) Higher than expected projected morbidity.
H2-LN-LTC-1 and H2-LH-LTCH-1	The average increase is 15%. The increase is needed due to three major factors: 1) Lower than expected investment earnings; 2) Higher than expected persistency (lower lapse and mortality); 3) Higher than expected projected morbidity.

H2-LN-LTC-1 and H2-LH-LTCH-1	The average increase is 15%. The increase is needed due to three major factors: 1) Lower than expected investment earnings; 2) Higher than expected persistency (lower lapse and mortality); 3) Higher than expected projected morbidity.
H3-NC-LTCC-1(97)	SD - *one-half of the increase implemented on Nov 1, 2006 and 2007.
H3-NC-LTCC-1(97)	OH - *one-half of the increase implemented on Nov 1, 2006 and 2007.
H3-NC-LTCC-1(97)	WI - *one-half of the increase implemented on Sept 1, 2005 and 2007.
H3-NC-LTCC-1(97)	MS - *one-half of the increase implemented on Nov 1, 2006 and 2007.
H3-NN-LTCN-1(97)	SD - *one-half of the increase implemented on Nov 1, 2006 and 2007.
H3-NN-LTCN-1(97)	MS - *one-half of the increase implemented on Nov 1, 2006 and 2007.
H3-NN-LTCN-1(97)	WI - *one-half of the increase implemented on Sept 1, 2005 and 2007.
H3-NN-LTCN-1(97)	OH - *one-half of the increase implemented on Nov 1, 2006 and 2007.
H3-NN-LTCN-1(97) and H3-NC-LTCC-1(97)	The average increase is 37%. The increase is needed due to three major factors: 1) Lower than expected investment earnings; 2) Higher than expected persistency (lower lapse and mortality); 3) Higher than expected projected morbidity.
H3-NN-LTCN-1(97) and H3-NC-LTCC-1(97)	The average increase is 37%. The increase is needed due to three major factors: 1) Lower than expected investment earnings; 2) Higher than expected persistency (lower lapse and mortality); 3) Higher than expected projected morbidity.
H3-NN-LTCN-1(97) and H3-NC-LTCC-1(97)	The average increase is 37%. The increase is needed due to three major factors: 1) Lower than expected investment earnings; 2) Higher than expected persistency (lower lapse and mortality); 3) Higher than expected projected morbidity.
H3-NN-LTCN-1(97) and H3-NC-LTCC-1(97)	The average increase is 37%. The increase is needed due to three major factors: 1) Lower than expected investment earnings; 2) Higher than expected persistency (lower lapse and mortality); 3) Higher than expected projected morbidity.
H3-NN-LTCN-1(97) and H3-NC-LTCC-1(97)	The average increase is 37%. The increase is needed due to three major factors: 1) Lower than expected investment earnings; 2) Higher than expected persistency (lower lapse and mortality); 3) Higher than expected projected morbidity.
H3-NN-LTCN-1(97) and H3-NC-LTCC-1(97)	The average increase is 37%. The increase is needed due to three major factors: 1) Lower than expected investment earnings; 2) Higher than expected persistency (lower lapse and mortality); 3) Higher than expected projected morbidity.